

ID No. **SV-C2**

| 1 LOCATION OF WATER WELL:   | Fraction              | Section Number  | Township Number          | Range Number |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|-----------------------|---|--------------------------|--------------|------|----|------|--------------------|--------------|----------|--|------------------------|--|--|--|--------------------------|----------|----------|--|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| County: <b>Stevens</b>  | <b>SW ¼ SW ¼ NE ¼</b> | <b>16</b>   | <b>33</b>                | <b>37w</b>   |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 WATER WELL OWNER: <b>City of Hugoton</b>  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| RR#, St. Address, Box # <b>112 5<sup>th</sup> St</b>  |                       | Board of Agriculture, Division of Water Resources   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| City, State, ZIP Code : <b>Hugoton, KS 67951</b>  |                       | Application Number:   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:   |                       | 4 DEPTH OF WELL <b>90.00</b> ft.  |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       | WELL'S STATIC WATER LEVEL <b>NA</b> ft.   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       | WELL WAS USED AS:   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       | 1 Domestic                      5 Public Water Supply                      9 Dewatering<br>2 Irrigation                      6 Oil Field Water Supply                      10 Monitoring Well<br>3 Feedlot                      7 Lawn and Garden (domestic)                      11 Injection Well<br>4 Industrial                      8 Air Conditioning                      12 Other <b>Soil Vapor Extrac.</b> |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b><br>If yes, mo/day/yr sample was submitted _____<br>Water Well Disinfected: Yes _____ No <b>X</b>   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 TYPE OF BLANK CASING USED:  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Steel                      3 RMP (SR)                      5 Wrought                      7 Fiberglass                      9 Other (specify below)<br>② PVC                      4 ABC                      6 Asbestos-Cement                      8 Concrete Tile <b>Overdrilled 3 ft.</b>  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Blank casing diameter <b>2</b> in. Was casing pulled? Yes _____ No <b>X</b> If yes, how much _____  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Casing height above or below land surface <b>-3 Ft</b> in.  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout <u>3 Bentonite</u> 4 Other _____   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Grout Plug Intervals From <b>90.00</b> ft. to <b>3</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| What is the nearest source of possible contamination:   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Septic tank                      6 Seepage pit                      11 Fuel storage                      16 Other (specify below)<br>2 Sewer lines                      7 Pit privy                      12 Fertilizer storage <u>None</u><br>3 Watertight sewer lines                      8 Sewage lagoon                      13 Insecticide storage<br>4 Lateral lines                      9 Feedyard                      14 Abandoned water well<br>5 Cess Pool                      10 Livestock pens                      15 Oil well/ Gas well  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Direction from well? _____ How many feet? _____   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><b>90.00</b></td> <td><b>3</b></td> <td></td> <td><b>Bentonite Grout</b></td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>Overdrilled 3 ft.</b></td> </tr> <tr> <td><b>3</b></td> <td><b>0</b></td> <td></td> <td><b>Backfill</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                       |   |                          |              | FROM | TO | CODE | PLUGGING MATERIALS | <b>90.00</b> | <b>3</b> |  | <b>Bentonite Grout</b> |  |  |  | <b>Overdrilled 3 ft.</b> | <b>3</b> | <b>0</b> |  | <b>Backfill</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM  | TO                    | CODE  | PLUGGING MATERIALS       |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>90.00</b>  | <b>3</b>              |   | <b>Bentonite Grout</b>   |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   | <b>Overdrilled 3 ft.</b> |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3</b>  | <b>0</b>              |   | <b>Backfill</b>          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>3-8-06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>2-7-07</b> under the business name of <b>Woofter Pump &amp; Well Inc.</b> by (signature) <u>Jay C. Woofter</u>   |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.  |                       |   |                          |              |      |    |      |                    |              |          |  |                        |  |  |  |                          |          |          |  |                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |